

REGISTRATION FOR ENROLLMENT
2025-2026 School Year



Student Information

First Name _____ Last Name _____

Age _____ Date of Birth (m/d/y) _____ ☐ Boy ☐ Girl

Student Address _____ City _____ Zip _____

How did you hear about our school? _____

Parent Information

First	First
Last	Last
Address	Address
City State Zip	City State Zip
Occupation	Occupation
Cell Phone	Cell Phone
Work Phone	Work Phone
Email	Email

Please indicate which class you are registering for:

Morning Class

3 hours per day (8:30-11:30)

- ☐ 4 days - Mon. through Thurs.
☐ 3 days - Mon., Tues., Wed.
☐ 3 days - Tues., Wed., Thurs.

Afternoon Class

3 hours per day (12:30-3:30)

- ☐ 4 days - Mon. through Thurs.
☐ 3 days - Mon., Tues., Wed.
☐ 3 days - Tues., Wed., Thurs.

Class Preference

Initial all boxes:

- | |
|--|
| <p><input type="checkbox"/> Student must be 3-years old by September 1st, 2025 (possible exceptions may be made on a case by case basis).
<input type="checkbox"/> Student must have efficient self-toileting skills.
<input type="checkbox"/> Materials fee for each student of \$200.00 is due before August 1st. Kindergarten Curriculum fee is \$50.00
<input type="checkbox"/> A withdrawal from the school after August 1st will require September tuition payment.</p> |
|--|

Please include the non-refundable registration fee (\$250 for new families OR \$200 for returning families) to hold your students place and return this form to our classrooms 121 & 126 OR mail to Edmonds Montessori **700 Main Street, Edmonds, WA 98020.**

Parent Signature _____

Date _____